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FACSIMILE COVER SHEETDATE: June 1, 2006OUR REF.: MKPA-105US

TIME: _____

YOUR REF.: 10/619,115

TO:	Examiner Michael Powers
COMPANY:	U.S. Patent and Trademark Office
FROM:	Kenneth N. Nigon
FAX TELEPHONE:	(571) 273-8300
OFFICE TELEPHONE:	
TITLE OF DOCUMENT:	Mail Stop Amendment

Total Number of Pages: 13 (including this form)

COMMENTS

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PTO/S&Z1 (09-04) (AW 10/2004)

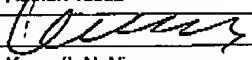
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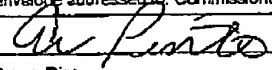
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/619,115
	Filing Date	July 14, 2003
	First Named Inventor	Michael Powers
	Art Unit	2874
	Examiner Name	Sarah U. Song
	Attorney Docket No.	MKPA-105US
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Firm Name	RatnerPrestia		
Signature			
Printed Name	Kenneth N. Nigon		
Date	June 1, 2006	Registration No.	31,549

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Signature			
Typed or Printed Name	Anne Pinto	Date	June 1, 2006

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Appln. No.: 10/619,115
Amendment Dated June 1, 2006
Reply to Office Action of March 6, 2006

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Appln. No: 10/619,115
Applicant: Michael Powers
Filed: 07/14/2003
Title: INTEGRATED FIBER ATTACH PAD FOR OPTICAL PACKAGE
TC/A.U.: 2874
Examiner: Sarah U. Song
Confirmation No.: 6849
Docket No.: MKPA-105US

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Responsive to the Office Action dated March 6, 2006, please amend the above-identified application as follows:

- ☐ **Amendments to the Specification** begin on page of this paper.
- ☒ **Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.
- ☐ **Amendments to the Drawings** begin on page of this paper and include an attached replacement sheet(s).
- ☐ **Amendments to the Abstract** are on page of this paper. A clean version of the Abstract is on page of this paper.
- ☒ **Remarks/Arguments** begin on page 2 of this paper.